AND

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON DR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS**

97 JAN 17 AM 9: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # J12465

i Corporant	on realine								
ACITA	MASSAGE, INC.								
	naconce, inc.								
Principal Plan	ce of Business	Mailing Address				4			
		Mailing Address							
	W. 25 Ct.	7940 W. 2							
Hia1	eah, Fl 33016	Hialeah,	F1	33(016				
						3. Date Incorporated or Qualified	3a. Date of	of Last Rep	юrt
# D::		- T				05/02/1986	<u>i</u>	· · · · · · · · · · · · · · · · · · ·	
	Place of Business	2a. Mailing Address				4. FEI Number 59 -2732135			ied For
Suite. Apt	# atc	Suite Apt #, etc.				54-213~137			Applicable
22	r, 610.	27				5. Certificate of Status Desired		8.75 Add Fee Requ	
City & Stat	re	City & State				6. Election Campaign Financing		<u>-</u>	
23		28				Trust Fund Contribution		\$5.00 Ma Added to F	
Z _i p	Country	Ζιρ	Cou	intry	·	8. This corporation has liability for i			
24	25	29	30			· · · · · · · · · · · · · · · · · · ·]Yes □ N		30 000
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	istered Age	nt	
				81	Name				
Martinez, Raul					Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
7940 W. 25 Ct.									
Hial	eah, Fl 33016			63					
			ŀ	84	City		Ben & 84	5 Zip Coo	de .
					•		FLI	1 '	
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State	2 and 607.1508, Florida Statu of Florida, Such channe was	ites, the at	boye-i	named corp	oration submits this statement for the pion's board of directors. I hereby accep	urpose of cha	nging its re	egistered
agent la	im familiar with, and accept the obliga	itions of Section 607.0505, F	lorida Stat	utes.	no corporat	toris board of directors, thereby accep	tile appoint	116(11 a2 16)	3igrei eci
SIGNATURE		- 							
12,	Signature typed or printed name of registered ager OFFICERS AND			d Agent	signature require	ed when reinstating)	DATE		
TITLE	OFFICERS AND	DELETE	13.	TI E		ADDITIONS/CHANGES TO OFFIC		Change	IN 12 Addition
NAME	DP _			1.2 NAME			لا	Origings (
STREET ADDRESS	Raul Martinez				DDRESS				
CITY - ST - ZIP	7940 W. 25 CT. Hialeah, F1 33	016		TY-ST-					
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STREET ADDRESS			3.3 ST	reet al	ORESS				
CITY - ST - ZIP			3.4. CI	ITY - ST-	ZIP				
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STREET ADDRESS				REET AC		j	-		
CITY-ST: ZIP		Locurte	-	Y-ST-	ZIP			05 T	
NAME		L_] DELETE	6.1 fit				LJ	Change	Addition
STREET ADDRESS			6 2 NA		DDECOO.				
				REET AL					
OITY-ST-7IP	ov certify that the information supplied	with this films is unlantarily f	64CII	IY-ST	APP DOLOUGE	ify for the exemption stated in Section 1	10.07/03/65	loride Ct-1	tulan 1
turtriei cei	rtify that the information indicated on t fer path, that I am an officer or directo	his annual report of supplem	ientai annu	Jai rei	oort is true a	and accurate and that my signature sha	is.u/(3)(k), h have the sa	iorida Stati me legal ef	ties. I flect as if

that my name appears in Block 12 or Pic

SIGNATURE:



January 7, 1997

FLORIDA DEPARTMENT OF STATE_ Sandra B. Mortham Secretary of State

Re: J12465

Dear Mr. Toner,

The reason I had not sent in the annual report is due to the fact that I never received the application. Please make note of our new address 7940 W. 25 Court. Hialeah. F1. 33016 Enclosed you will find a check for \$200.00 and annual report. If you have any questions please call me at 305-827-3059.

Raul Martinez President

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